



UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:	Coelho, P. et al.
SERIAL NO.:	10/009,417
FILED:	December 4, 2001
FOR:	Autologous Thrombin

ART UNIT: 1651

EXAMINER: Gitomer, R.

To: Commissioner of Patents and Trademarks  
Washington, DC 20231

**ELECTION AND PRELIMINARY AMENDMENT**

Sir:

Responsive to the Examiner's election requirement under 35 U.S.C. §121 provided in the Office Action dated April 30, 2004, kindly enter the following election:

Applicant elects group III (claims 17 through 20, 26, 27, and 53).

This election is respectfully made with traverse and undersigned requests the Examiner to kindly reconsider his position.

06/03/2004 MMEKONEN 00000066 111734 10009417

01 FC:2201 1.00 DA 42.00 OP



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- \$ JFW

**ATTORNEY'S DOCKET NO. 31120-pa**

In re the application of: Coelho, Philip, et al.  
Serial No.: 10/009,417  
Filed: December 4, 2001  
For: Autologous Thrombin

Commissioner for Patents  
Post Office Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

\_\_\_\_\_ No additional fee is required.

The fee has been calculated as shown below:

(Col 1)		(Col 2)		(Col 3)		Small Entity: Small Entity:		Other Than A	
Claims		Highest No.		Present		Rate Addit.		Rate Addit.	
Remaining		Previously		Extra		Fee		Fee	
After		Paid For				OR			
Amendment									
Total:	*18	Minus	**20	0	x 9.=	0.		x 18.=	0.
Indep.:	*9	Minus	**8	1	x 42.=	42.		x 84.=	0.
Total:									\$42.00.

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

\*\*\*If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total of Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

A check in the amount of \$42.00 is enclosed to cover the filing fee for the presentation of additional claims.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 11-1734. A Duplicate copy of this sheet is enclosed.

XXX Any additional filing fees required under 37 CFR 1.16 for the presentation of extra claims.

\_\_\_\_\_ Any patent application processing fees under 37 CFR 1.17

Dated: May 28, 2004

  
BERNHARD KRETEN, Reg. No. 27,037